

State of North Carolina
Department of Transportation



**Small Business Enterprise
Contractor's Self Certification**

(2/08)

Send completed form to:

Contractual Services Unit
ATTN: SBE
1509 Mail Service Center
Raleigh, NC 27699-1509

(Name of BUSINESS)

(Owner's Name – First Middle Last)(Title)

(Street Address) (City) (State) (Zip)

(Mailing address) if different from street address (City) (State) (Zip)

(Business Telephone) (Fax Number) (Cell Phone)

Email Address (FEDERAL TAX I.D. NUMBER or Social Security Number)

A Business with an annual gross income over \$1.5 million (exclusive of materials) is not eligible to participate in the North Carolina Department of Transportation (NCDOT) Small Business Enterprise (SBE) Program.

I hereby certify that the Business listed above meets the criteria for the NCDOT Small Business Enterprise Program. Insurance as required by NCDOT shall be in the name of the Business and certificate of insurance shall be attached to the contract proposal as required. The above Business shall have its own financial resources. Information submitted may be subject to verification by NCDOT. False statements could result in all applicable civil and criminal penalties being imposed, including but not limited to the above firm being barred from doing business with NCDOT.

The Business shall comply with all terms and conditions of any contract awarded. The contract consists of, but is not necessarily limited to the proposal or "bid" submitted, the plans for the project, the specifications for the project and any supplemental agreements entered into.

NOTE - AFFIDAVIT MUST BE NOTARIZED

COUNTY OF _____

I _____, A Notary Public for said County, do hereby certify that
_____ personally appeared before me this day and acknowledged the due execution
of the foregoing instrument. Witness my hand and official seal, this ____ day of _____ 20____.

(Owner's Signature) } Seal: _____
(Notary Public)

(Title) My commission expires _____ 20____.

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1509 Mail Service Center
Raleigh, NC 27699-1509

Name of Business _____

Contractor's License No. (if available): _____

Directions: <i>Indicate the type(s) of work your firm is interested in bidding on:</i>	
<p>Hauling</p> <ul style="list-style-type: none"><input type="checkbox"/> Hauling (Asphalt)<input type="checkbox"/> Hauling (General) includes gravel, sand, debris, rubble, etc. <p>Landscaping and Erosion Control</p> <ul style="list-style-type: none"><input type="checkbox"/> Mowing<input type="checkbox"/> Silt Fence<input type="checkbox"/> Landscape Planting<input type="checkbox"/> Seeding and Mulching<input type="checkbox"/> Clearing<input type="checkbox"/> Grubbing <p>Masonry and Incidental Concrete</p> <ul style="list-style-type: none"><input type="checkbox"/> Brick masonry construction<input type="checkbox"/> Concrete curb and gutter etc.<input type="checkbox"/> Incidental Concrete Construction (includes sidewalks, driveways, wheelchair ramps, etc.) <p>Concrete Structures</p> <ul style="list-style-type: none"><input type="checkbox"/> Concrete Barrier<input type="checkbox"/> Bridges and Box Culverts<input type="checkbox"/> Reinforcing Steel <p>Drainage</p> <ul style="list-style-type: none"><input type="checkbox"/> Subsurface Drainage<input type="checkbox"/> Pipe Culverts <p>Utility Installation</p> <ul style="list-style-type: none"><input type="checkbox"/> Waterline Installation<input type="checkbox"/> Sanitary Sewer Installation<input type="checkbox"/> Construction Surveying	<p>Preparation for Paving</p> <ul style="list-style-type: none"><input type="checkbox"/> Cement Treatment Base Course<input type="checkbox"/> Soil Cement Base <p>Paving</p> <ul style="list-style-type: none"><input type="checkbox"/> Asphalt Concrete Plant Mix Paving<input type="checkbox"/> Asphalt surface treatment<input type="checkbox"/> Painting Steel Structure<input type="checkbox"/> Roadway Excavation<input type="checkbox"/> Concrete Pavement<input type="checkbox"/> Milling Asphalt Pavement <p>Pavement Finishing</p> <ul style="list-style-type: none"><input type="checkbox"/> Pavement Marking<input type="checkbox"/> Permanent Signing<input type="checkbox"/> Fence<input type="checkbox"/> Guardrail <p>Safety and ITS</p> <ul style="list-style-type: none"><input type="checkbox"/> Sign lighting systems<input type="checkbox"/> Signal traffic management system<input type="checkbox"/> Work Zone Signing <p>Other</p> <ul style="list-style-type: none"><input type="checkbox"/> Building removal and demolition<input type="checkbox"/> _____<input type="checkbox"/> _____
<i>The following information is collected for reporting purposes only</i>	
<p>Please indicate gender of firm's owner:</p> <ul style="list-style-type: none"><input type="checkbox"/> Male<input type="checkbox"/> Female	<p>Please indicate ethnicity of firm's owner:</p> <ul style="list-style-type: none"><input type="checkbox"/> Asian/Pacific American<input type="checkbox"/> African American<input type="checkbox"/> Caucasian American<input type="checkbox"/> Hispanic American<input type="checkbox"/> Native American<input type="checkbox"/> Subcontinent Asian American

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Directions: <i>Please check the divisions or counties in which you are seeking work.</i>			
Division	District 1	District 2	District 3
<input type="checkbox"/> One	<input type="checkbox"/> Camden <input type="checkbox"/> Currituck <input type="checkbox"/> Dare <input type="checkbox"/> Gates <input type="checkbox"/> Pasquotank <input type="checkbox"/> Perquimans	<input type="checkbox"/> Bertie <input type="checkbox"/> Hertford <input type="checkbox"/> Northampton	<input type="checkbox"/> Chowan <input type="checkbox"/> Hyde <input type="checkbox"/> Martin <input type="checkbox"/> Tyrrel <input type="checkbox"/> Washington
<input type="checkbox"/> Two	<input type="checkbox"/> Beaufort <input type="checkbox"/> Pitt	<input type="checkbox"/> Carteret <input type="checkbox"/> Craven <input type="checkbox"/> Pamlico	<input type="checkbox"/> Greene <input type="checkbox"/> Jones <input type="checkbox"/> Lenoir
<input type="checkbox"/> Three	<input type="checkbox"/> Onslow <input type="checkbox"/> Pender	<input type="checkbox"/> Duplin <input type="checkbox"/> Sampson	<input type="checkbox"/> Brunswick <input type="checkbox"/> New Hanover
<input type="checkbox"/> Four	<input type="checkbox"/> Edgecombe <input type="checkbox"/> Halifax	<input type="checkbox"/> Nash <input type="checkbox"/> Wilson	<input type="checkbox"/> Johnston <input type="checkbox"/> Wayne
<input type="checkbox"/> Five	<input type="checkbox"/> Wake	<input type="checkbox"/> Durham <input type="checkbox"/> Granville <input type="checkbox"/> Person	<input type="checkbox"/> Franklin <input type="checkbox"/> Vance <input type="checkbox"/> Warren
<input type="checkbox"/> Six	<input type="checkbox"/> Robeson	<input type="checkbox"/> Cumberland <input type="checkbox"/> Harnett	<input type="checkbox"/> Bladen <input type="checkbox"/> Columbus
<input type="checkbox"/> Seven	<input type="checkbox"/> Alamance <input type="checkbox"/> Orange	<input type="checkbox"/> Guilford	<input type="checkbox"/> Caswell <input type="checkbox"/> Rockingham
<input type="checkbox"/> Eight	<input type="checkbox"/> Chatham <input type="checkbox"/> Randolph	<input type="checkbox"/> Hoke <input type="checkbox"/> Lee <input type="checkbox"/> Moore	<input type="checkbox"/> Montgomery <input type="checkbox"/> Richmond <input type="checkbox"/> Scotland
<input type="checkbox"/> Nine	<input type="checkbox"/> Davidson <input type="checkbox"/> Rowan	<input type="checkbox"/> Davie <input type="checkbox"/> Forsyth <input type="checkbox"/> Stokes	
<input type="checkbox"/> Ten	<input type="checkbox"/> Cabarrus <input type="checkbox"/> Stanly	<input type="checkbox"/> Mecklenburg	<input type="checkbox"/> Anson <input type="checkbox"/> Union
<input type="checkbox"/> Eleven	<input type="checkbox"/> Alleghany <input type="checkbox"/> Surry <input type="checkbox"/> Yadkin	<input type="checkbox"/> Avery <input type="checkbox"/> Caldwell <input type="checkbox"/> Watauga	<input type="checkbox"/> Ashe <input type="checkbox"/> Wilkes
<input type="checkbox"/> Twelve	<input type="checkbox"/> Cleveland <input type="checkbox"/> Gaston	<input type="checkbox"/> Alexander <input type="checkbox"/> Iredell	<input type="checkbox"/> Lincoln <input type="checkbox"/> Catawba
<input type="checkbox"/> Thirteen	<input type="checkbox"/> Burke <input type="checkbox"/> McDowell <input type="checkbox"/> Mitchell <input type="checkbox"/> Rutherford	<input type="checkbox"/> Buncombe <input type="checkbox"/> Madison <input type="checkbox"/> Yancey	
<input type="checkbox"/> Fourteen	<input type="checkbox"/> Henderson <input type="checkbox"/> Polk <input type="checkbox"/> Transylvania	<input type="checkbox"/> Haywood <input type="checkbox"/> Jackson <input type="checkbox"/> Swain	<input type="checkbox"/> Cherokee <input type="checkbox"/> Clay <input type="checkbox"/> Graham <input type="checkbox"/> Macon